

# Utah's Behavioral Risk Factor Surveillance System Arthritis Follow-Up Survey

**Authors:** Randy Tanner, Richard Bullough, Michael Friedrichs, LaDene Larsen

**Utah Arthritis Program**  
(801) 538-9291

rbullough@utah.gov

rtanner@utah.gov

www.health.utah.gov/arthritis

## PURPOSE/ LEARNING OBJECTIVES

Utah's BRFSS Arthritis Follow-up Survey was created to gain information about behaviors from individuals with arthritis. These behaviors include the type of medical provider selected to treat their arthritis, preferred sources of arthritis management recommendations made by providers, and other factors. Session participants will learn that BRFSS follow-up surveys are effective in gaining relevant information about individuals with chronic conditions.



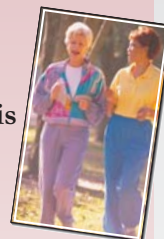
## BACKGROUND

Much remains to be learned about factors affecting people with arthritis and medical provider's recommendations for care. Existing surveys are valuable, but do not provide all the information needed. Therefore, the Utah Arthritis Program created a BRFSS arthritis follow-up survey which includes 24 questions about medical care, arthritis

management techniques, and other related issues.

## METHODS\*

- Arthritis prevalence was measured using the CDC's *arthritis definition*.
- 714 individuals with arthritis completed the survey
- 60% were women and 40% were men
- 16% were 18-34  
30% were 35-49  
30% were 50-64  
23% were over 65



\*Results were weighted using 2000 Utah population data, and analyzed using SAS and SUDAAN

## RESULTS

Figure 1

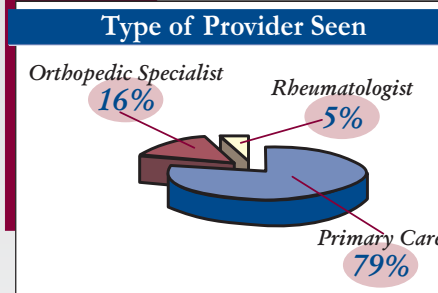
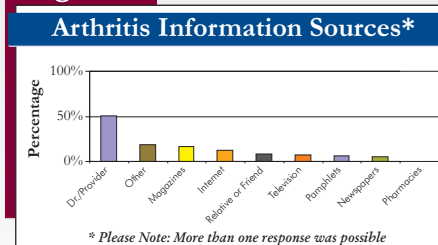


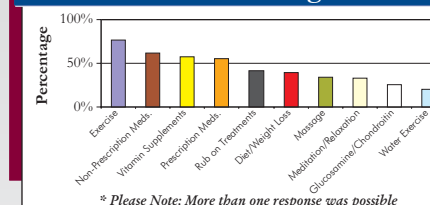
Figure 2



\* Please Note: More than one response was possible

Figure 3

### Methods Used to Manage Arthritis\*



\* Please Note: More than one response was possible

Figure 4

### Exercise as Management for Arthritis

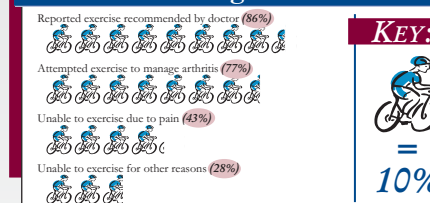


Figure 5

### Diet/Weight Loss as Management for Arthritis



## CONCLUSION

Individuals with arthritis most often seek care and information from primary care providers. These providers frequently recommend exercise and diet/weight loss to manage arthritis symptoms. However, many individuals encounter various barriers that make compliance difficult. Public health programs and medical providers must focus on reducing these barriers to improve health outcomes for persons with arthritis.